

State of South Dakota
Statement of Financial Interest
Candidate for Public Office

Appendix F

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JUL 26 2010

SD SEC OF STATE

File statement in the office where your nominating petition or convention nomination certification was filed

Please read information on reverse side before completing this form.

1. Name Melissa Magstadt
2. Address 1206 9th Ave NE Watertown SD
3. Office Sought District 5 House of Representatives
4. What is your occupation/profession? Nurse Practitioner/Consultant

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

Health Care Design Management, LLC Melissa Magstadt-owner

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

What is the nature of your immediate family's association with each?

Health Care Design Management, LLC Melissa Magstadt-owner

Filed this 26th day of

July 2010

State of South Dakota)
County of Rodriguez) SS.

Verification

Chris Nelson
SECRETARY OF STATE

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed) Melissa Magstadt

Sworn to before me this 25 day of July, 2010

(Seal)



Revised 1997

Byron Callies
Officer Administering Oath
My commission expires: Dec 13, 2012